PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003				Applica	Application or Docket Number		
CLAIMS	S FILED - PART	- All	Sheet	1091	ani	711	
TOTAL CLAIMS	(Column 1)		SMA	LL ENTITY	8_//_	///	
	-	(Column 2)	TYP		OR :	OTHER THA	
FOR	NUMBER FILED	 		TE FEE		SMALL ENTI	
TOTAL CHARGEABLE CLAIMS	3	NUMBER EXTRA	BASI	FEE 385.0	- H	RATE FE	
INDEPENDENT CLAIMS	minus 20=	•	X\$		JOR PA	SIC FEE 770.	
MULTIPLE DEPENDENT CLAIM PR	minus 3 =	*			OR X	\$18=	
			- X43	=	OR X	86=	
* If the difference in column 1 is !	ess than zero, enter	"O" in column o	+145	i=	OR +2	90=	
MO/11/A/2 CLAIMS AS AI	MENDED - PART	m column S	TOTA	L	OR TO		
(Column 1)	(Column				_		
REMAINING AFTER	HIGHES NUMBE	31	SMAL		OR SM	HER THAN ALL ENTITY	
REMAINING AFTER AMENOMENT Total 20 M Independent 3 M	PREVIOUS PAID FO	SLY	RATE	ADDI- TIONAL	.	ADDI-	
Independent M	inus "86	-	l	FEE	RA'	TE TIONAL FEE	
FIRST PRESENTATION OF	inus ***	-1	X\$ 9=		OR X\$1		
FIRST PRESENTATION OF MULT	IPLE DEPENDENT CL	AIM []	X43=		OR X86	=	
			+145=				
(Column 1)			TOTAL ADDIT. FEE		P +290	TAT	
CLAIMS REMAINING	(Column 2	(Column 3)	- CO11. FEE		R ADDIT F	EE	
AFTER AMENDMENT	NUMBER PREVIOUSLY	PRESENT	DATE	ADDI-		1 400	
Total Mint	PAID FOR		RATE	TIONAL FEE	RATE		
Ind pendent . Minu			X\$.9=	OF	X\$18=	FEE	
FIRST PRESENTATION OF MULTIP	LE DEPENDENT CLAI	M [7]	X43=		-	-	
			+145=	OA	X86=	-	
ío .	•		TOTAL	OR.	+290=		
(Column 1)	(Column 2)	(Column 3)	ADDIT, FEE	OR	TOTAL ADDIT, FEE	barra i estresi	
RÉMAINING AFTER	HIGHEST NUMBER	PRESENT			-		
MENDMENT	PREVIOUSLY PAID FOR	EXTRA	PATE TI	NDDI- ONAL	DATE	ADDI-	
Minus	29	=		EE	RATE	TIONAL	
	XXX		X\$ 9=	OR	X\$18=		
IRST PRESENTATION OF MULTIPLE	DEPENDENT CLAIM	<u>—</u> ———————————————————————————————————	X43=	OR	X86=		
eentry in column 1 is less than the entry in o "Highest Number Previously Pald For" IN "Highest Number Previously Pald For" IN	column o		+145=				
earry in column 1 is less than the entry in a "Highest Number Previously Paid For" IN a "Highest Number Previously Paid For" IN "Highest Number Previously Paid For" (Tot 1985) (Rev. 1983)	THIS SPACE is less than	Imn 3;		OR L	+290=		
Tumber Previously Paid For Cod	or locate is less than	3, enter 3. AC	OIT FEE	OR .	TOTAL DIT. FEE		